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U.S.PTO

AGILENT TECHNOLOGIES, INC.  
Legal Department, DL429  
Intellectual Property Administration  
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ATTORNEY DOCKET NO. 70020777-1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
Patent Application Transmittal Letter

COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria VA 22313-1450

22389 U.S.PTO  
10/692879  
102303

Sir:

Transmitted herewith for filing under 37 CFR 1.53(b) is a(n):  Utility  Design

Original patent application,  
 Continuation-in-part

INVENTOR(S): Sun

TITLE: Improved Pen Mouse

Enclosed are:

The Declaration and Power of Attorney  
 5 sheets of drawings (one set)  
 Form PTO-1449  
 Priority document(s)

 Other:

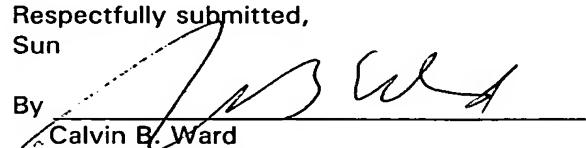
Signed  Unsigned or partially signed  
 Associate Power of Attorney  
 Information Disclosure Statement and Form PTO-1449

Other Fee: \$

CLAIMS AS FILED BY OTHER THAN A SMALL ENTITY				
(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) TOTALS
TOTAL CLAIMS	- 20		X \$18	
INDEPENDENT CLAIMS	- 3		X \$86	
ANY MULTIPLE DEPENDENT CLAIMS			\$290	
BASIC FEE: Design (\$340.00); Utility (\$770.00)				\$770.00
TOTAL FILING FEE				
OTHER FEES				
TOTAL CHARGES TO DEPOSIT ACCOUNT				

Charge \$770.00 to Deposit Account 50-1078. At any time during the pendency of this application, please charge any fees required or credit any over payment to Deposit Account 50-1078 pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account 50-1078 under 37 CFR 1.16, 1.17, 1.19, 1.20 and 1.21. A duplicate copy of this sheet is enclosed.

Respectfully submitted,  
Sun

By   
Calvin B. Ward  
Attorney/Agent for Applicant(s)

Reg. No. 30,896

Date: October 23, 2003

Telephone No. (925) 855-0413

"Express Mail" Label No.: EU 717328029

Date of Deposit: October 23, 2003

I hereby certify that this is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria VA 22313-1450.

Typed Name: Calvin Ward

Signature: 